



**Note: If submitting your order by mail, you must have your sworn statement notarized using the Certificate of Acknowledgment below. Only one notarized statement is required per order not per certificate.**

### SWORN STATEMENT

I, \_\_\_\_\_, swear under penalty of perjury under the laws of the  
(Printed Name)

State of California, that I am an authorized person, as defined in California Health and Safety Code Section 103526 (c), and am eligible to receive a certified copy of the birth or death record of the following individual(s):

Name of Person Listed on Certificate	Relationship to Person Listed on Certificate

Sworn this \_\_\_\_\_ day of \_\_\_\_\_, 200\_, at \_\_\_\_\_, \_\_\_\_\_ (Day)  
(Month) (City) (State)

(Signature) \_\_\_\_\_

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### CERTIFICATE OF ACKNOWLEDGMENT

State of \_\_\_\_\_ )  
 ) ss  
County of \_\_\_\_\_ )

On \_\_\_\_\_, before me personally appeared

\_\_\_\_\_

☐ personally known to me, or ☐ proved to me on the basis of satisfactory evidence, to be the person whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her authorized capacity, and that by his/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.

(NOTARY SEAL)

\_\_\_\_\_